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PTO/SB/21 (08-00)

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Approved for use through 10/31/02. OMB 0651-0031

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number Of Pages In This Submission

10

Application Number

10/018,977

Filing Date

December 12, 2001

First Named Inventor

Kin-Ping Wong

Group Art Unit

1654

Examiner Name

Coe, Susan D.

Attorney Docket No.

AN 2002.00

ENCLOSURES (check all that apply)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers
(for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declarations | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/
Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts
under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm
or
Individual Name

Antoinette F. Konski
Bingham McCutchen LLP
Three Embarcadero Center, Suite 1800
San Francisco, California 94111

Signature

Date

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper and all enclosures are being sent to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below via facsimile.

June 17, 2003

Peggy Nichols

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PTO/SB/17 (03-01)

Approved for use through 10/31/2002. OMB 0531-0032
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FEE TRANSMITTAL
FOR FY 2003

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$485.00)

Completes If Known

Application Number 104016,977

Filing Date December 12, 2001

First Named Inventor Kuo-Ping Wong

Examiner Name Ooa, Susan D.

Group Art Unit 1654

Attorney Docket No. AN 2002.00

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 50-2518

Deposit Account Name Bingham McCutchen LLP

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☒
- Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

- ☐
- Check
- ☐
- Credit Card
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- Money Order
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- Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20*	x		\$
Independent Claims	x		\$
Multiple Dependent			\$

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 5
1203	200	2203	100	Multiple dependent claims, if not paid
1204	84	2204	42	*Reduced independent claims over original patent
1205	18	2205	9	*Reduced claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

* or number previously paid, if greater; For reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	2053	65	Non-English specification	
1812	2,520	2812	1,260	For filing a request for ex parte reexamination	
1804	820*	2804	410*	Requesting publication of SIR prior to Examiner action	
1806	1,840*	2806	920*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	850	2253	425	Extension for reply within third month	485.00
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	2451	755	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	2460	65	Petitions to the Commissioner	
1807	50	2807	25	Petitions related to provisional applications	
1808	180	2808	90	Submission of Information Disclosure Sheet	
8021	40	2021	20	Recording each patent assignment per properties (lines number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	2802	450	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$485.00)

SUBMITTED BY

Name (Print/Type) Antoinette E. Kossel

Registration No. 34,202

Complete (if applicable)

Telephone (650) 849-4950

Signature

Date June 17, 2003

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BINGHAM McCUTCHEN

Facsimile

DATE June 17, 2003

	NAME	FAX	PHONE
TO	Attn: Group Art Unit 1654	(703) 872-9306	

FROM	Antoinette F. Konski	(650) 849-4800	(650) 849-4950
	Antoinette.konski@bingham.com		

PAGES (INCLUDING THIS COVER PAGE): 11

RE Application Serial No. 10/016,977

Message:**OFFICIAL****FAX RECEIVED**

JUN 18 2003

GROUP 1600

Bingham McCutchen LLP
1900 University Avenue
East Palo Alto, CA
94303-2223

650.849.4400
650.849.4800 fax

bingham.com

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